NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION AIR QUALITY PERMITTING

GENERAL PERMIT REGISTRATION FORM

STORAGE AND TRANSFER OF SERVICE STATION FUELS AT GASOLINE DISPENSING FACILITIES

SECTION A: FACILITY PROFILE

| Facility ID Number | Facility Name |
|--|--|
| Street Address | Mailing Instructions |
| Address Line 1 | and Information: |
| Address Line 2 | and information: |
| Address Line 3 City State Zip | |
| CityStateZip | THE TEST OF THE COLOR |
| | NJDEP - Air Quality Permitting Program 401 E. State Street, PO Box 027 |
| Maria Addition City 1 1 C | , |
| <u>Mailing Address</u> ☐ Check if same as street addre Address Line 1 | • |
| Address Line 2 | |
| Address Line 3 | |
| City State Zip | |
| , | For Assistance, Please call: |
| | (800) 441-0065 within NJ |
| County | (609) 292-6716 outside NJ |
| County Where Facility Is Located | |
| | |
| Location Description | Industry Information |
| | Primary SIC |
| | Secondary SIC |
| | |
| | |
| | |
| Facility Contact | |
| | er is the operator Operator |
| Contact person (check one or check both if owner | |
| Contact person (check one or check both if owners) Name | Organization |
| Name Title Phone | Organization Organization Type NJ EIN |
| Contact person (check one or check both if owner Name Title Phone Fax | Organization Organization Type NJ EIN Mailing Address |
| Contact person (check one or check both if owner Name Title Phone Fax Other | Organization Organization Type NJ EIN Mailing Address Address Line 2 |
| Contact person (check one or check both if owner Name Title Phone Fax Other | Organization Organization Type NJ EIN Mailing Address |

SECTION B: REASON FOR APPLYING (Check All That Apply)

| □ New or | Existing, Un-pe | ermi | tted Unit(s) | | | |
|------------------|--------------------------------|------|--|-------------------------|-----------|-----------------|
| □ Permitte | ed Unit(s). | | Previous 1 | Permit and/or Certif | ficate Nu | mber(s): |
| Did this fac | ility Dispense g | gaso | line prior to June 29, | 2003? | □Yes | □No |
| SECTION | C: EQUIPMEN | NT I | NVENTORY | | | |
| | ion Unit IID# | | Type of Stage 2 Vapor Recovery System (Check only one box) | | | |
| U- | | | Vapor Balance System Vacuum Assist System | 1 | | |
| | | ı | , | <u> </u> | | |
| Equipment NJID # | Tank Conten | ts | Tank Location | Tank Capacity (Gallons) | Ir | stallation Date |
| E- | Gasoline Diesel | | Above Ground | , | | |
| E- | Kerosene Gasoline Diesel | | Below Ground □ Above Ground □ | | | |
| _ | Kerosene | | Below Ground | | | |
| E- | Gasoline Diesel Kerosene | | Above Ground □ Below Ground □ | | | |
| E- | Gasoline Diesel | | Above Ground | | | |
| | Kerosene | | Below Ground | | | |
| E- | Gasoline Diesel | | Above Ground □ | | | |

SECTION D: PERMITTING SCENARIOS

Kerosene

Registration under this General Permit covers all gasoline tanks and pumps equipped with Stage 1 and Stage 2 equipment as described in the General Permit. This General Permit Registration Form covers all equipment related to storage and transfer of service station fuels at Gasoline Dispensing Facilities. One single General Permit Registration Form must be used.

Below Ground

SECTION E: CERTIFICATION

| Name of Individual With Direct Knowledge | Title | Signature | Date |
|--|---|---|------------------|
| in this document and all attach | ŕ | | • |
| responsible for obtaining the ir | nformation, I believe that re are significant civil and | the submitted information is tru I criminal penalties, including t | ue, accurate and |

INSTRUCTIONS FOR COMPLETING THE REGISTRATION FORM STORAGE AND TRANSFER OF SERVICE STATTION FUELS AT GASOLINE DISPENSING FACILITIES

SECTION A: FACILITY PROFILE

Facility (ID Number & Name) - Enter the New Jersey air pollution facility identification number (ID) followed by the facility name for which the General Permit is being registered. The ID is a five-digit number assigned by the New Jersey Department of Environmental Protection. Your facility name is the one registered with the New Jersey Secretary of State, under which your facility does business.

Street Address - Enter the address of the facility where the equipment to be permitted is physically located.

Mailing Address - Enter the facility s mailing address. If it is the same as the facility location, check the box provided.

Mailing Instructions & Information - Once the General Permit Registration Form has been completed, it should be mailed along with the appropriate fee(s) to the New Jersey Department of Environmental Protection at the address listed on the front page of the Registration form. The fee is \$250.00 per General Permit Registration Form submitted. Make checks payable to ATreasurer, State of New Jersey.

County - Enter the county in which the facility is located (**not the mailing address county**).

Location Description - Describe the facility s location if it is difficult to find using the street address. If you have to give a visitor directions to your facility, consider showing them here. (*Example*: "Two miles down the access road that leaves state highway 29 at mile marker 10.")

Industry Information - Enter the facility s four-digit primary and secondary (if any) Standard Industrial Classification Codes (SIC) or equivalent. Use the codes registered with the US Department of Labor. You may also refer to the Standard Industrial Classification Manual from the U.S. Office of Management and Budget or equivalent industrial classification code.

Facility Contact - Check the box indicating the facility contact person for this General Permit Registration. If the owner and operator are the same, check both boxes. Enter the name, title, phone and fax numbers, other phone numbers and type of number (*Example:* pager, toll free, cell phone), e-mail address, the organization that the contact person works for, the type of organization (federal, local, public, private, state or utility), the New Jersey Employer Identification Number (EIN) and the contact mailing address.

SECTION B: REASON FOR APPLYING

This section of the General Permit Registration Form provides the Department with the reason the General Permit Registration Form is being submitted.

New or Existing, Un-permitted Unit(s) - Check this box if this application is being filed for a unit(s) for which no current permit exists.

Permitted Unit(s) - Check this box if this application is being filed to supercede an existing permit or permits covering a unit(s). The permit or permits being superceded may be either Pre-Construction Permits or existing General Permits. These existing permits will need to be listed in the Registration.

Previous Permit or Certificate Number - List the previous permit(s) that are being superceded.

Did this facility Dispense gasoline prior to June 29, 2003? – Check the Yes box if the facility dispensed gasoline prior to June 29, 2003. Check the No box if the facility did not dispense gasoline prior to June 29, 2003

SECTION C: EQUIPMENT INVENTORY

Emission Unit NJID - A facility may do either one of the two following:

- **1-** Enter a unique 6 digit identification number (*example:* U-000010) for the storage and transfer of service station fuels equipment group covered by this General Permit. Once a number is used to identify the storage and transfer of service station fuels equipment group or any another piece of equipment at the facility, the same number cannot be used to identify any other piece of equipment at the facility. (*Note:* If the 6 digit identification number the facility enters is incorrect or conflicts with any number registered with the Department, then the Department will assign an appropriate number for the equipment);
- **2-** Leave this line blank and the Department will assign an appropriate 6-digit identification number for storage and transfer of service station fuels equipment group covered by this General Permit. The Department will not assign the same two numbers for any piece of equipment registered for the facility.

Type of Stage 2 Vapor Recovery System - Check the box indicating the type of Stage 2 Vapor Recovery System that is present at the facility (Check only one box)

Equipment NJID - see Emission Unit NJID

Tank Contents - Check the box of the fuel stored in the storage tank (Check only one box)

Tank Location - Check the box of the location of the storage tank (Check only one box)

Tank Capacity - Enter the maximum capacity (in gallons) for each storage tank to be covered by this General Permit.

Installation Date - Enter the date on which the storage tank was installed

SECTION D: PERMITTING SCENARIOS

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SECTION E: CERTIFICATION

Print or type the Name and Title of the Individual with Direct Knowledge or Responsible Official. Sign and date the application with an original signature.

Individual with Direct Knowledge - Individual listed as the contact person or any person with direct knowledge of and responsibility for the information contained in the General Permit Registration Form. This may or may not be the same person who signs as the Responsible Official defined below.

Responsible Official - A facility official responsible for the General Permit Registration. A Responsible Official as defined in N.J.A.C. 7:27-1.4 is as follows:

• For a corporation: a president, secretary, treasurer, or vice-president of the corporation; any other

person who performs similar policy or decision making functions for the corporation; or a duly authorized representative responsible for the overall

operation of a facility (plant manager, etc.).

For a partnership: a general partner.

• For a sole proprietorship: the proprietor

• For a government agency: either a principal executive officer or ranking elected official.